

**Volunteer Coordinator ONLY**

Received \_\_\_\_\_

Contacted \_\_\_\_\_

Orientation \_\_\_\_\_

Tier    1       2       3       4

# VOLUNTEER APPLICATION

740 Fuller Ave NE Grand Rapids, MI 49503 . (616)632-7300 . M-F 9:30a-6:30p



Date of Application \_\_\_\_\_

Name \_\_\_\_\_ Phone 1 \_\_\_\_\_ Phone 2 \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Email address \_\_\_\_\_ Birthday (must be 18+) \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone(s) \_\_\_\_\_

Best form of contact? (check all that apply) ☐Phone ☐Email ☐Text    Do you use FB? ☐Yes ☐No

School \_\_\_\_\_ ☐Full Time ☐Part Time    Days \_\_\_\_\_

Employer \_\_\_\_\_ ☐Full Time ☐Part Time    Shift \_\_\_\_\_

**Dog Attendant**

Assists the Animal Specialists with daily care of dogs in the KCAS adoption program. Provides physical and mental stimulation to maintain overall wellbeing while in the shelter environment. Provides foundation training for basic manners in order to promote animal adoptability. Shifts are limited and staggered to allow the animals to adhere to a basic routine for stimulation and rest times.

**Office Work**

Assists the clerks or Animal Specialists with office type duties at KCAS. This may include, but is not limited to, making copies, filing, answering basic questions for customers, assisting in lost animal walk throughs, and directing customers.

What volunteer position interests you? ☐Dog attendant ☐Office work (as needed)

What days are you available to volunteer? (check all that apply) ☐Mon ☐Tues ☐Wed ☐Thur ☐Fri ☐Sat ☐Sun

If other, please describe \_\_\_\_\_

What is your desired shift? ☐Morning 9:00am-12noon (Mon-Sun) ☐Afternoon 2:00pm-5:00pm (Mon-Fri ONLY)

☐Morning 8:00am-11:00am (Sat/Sun ONLY)

If other, please describe \_\_\_\_\_

Are you available for a regularly scheduled shift each week\*? ☐Yes ☐No    \*We require at least 2 shifts/month.

Are you covered by health insurance? ☐Yes ☐No

Do you have any limitations which may prevent you from any work you are interested in? ☐Yes ☐No

If yes, please describe \_\_\_\_\_

What do you know about KCAS? \_\_\_\_\_

\_\_\_\_\_

Why do you want to volunteer at KCAS?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**What do expectations do you have/what do you hope to gain?**

---

---

---

**How long do you want to volunteer at KCAS?**

---

**Do you have any previous volunteer experience? If so, what/where?**

---

---

---

**What experience with animals do you have?**

---

---

---

**Do you have pets at home? If so, provide names/breeds/ages/etc.**

---

---

---

**Have you adopted from KCAS?** ☐Yes ☐No If not, where?

---

**How do you feel about humane euthanasia?**

---

---

---

**What are your thoughts on spaying/neutering and pet overpopulation?**

---

---

---

- ☐ I understand that the handling of animals and other volunteer activities may place me in a hazardous situation and could result in injury to me or my personal property. On behalf of myself, I release, discharge, indemnify and hold harmless Kent County Animal Shelter and its directors, employees, and agents from any and all claims, causes of action and demands of any nature, whether known or unknown, arising out of or in connection with my volunteer activities.
- ☐ Understanding that public relations are an important part of a volunteer's activities, I hereby grant Kent County Animal Shelter the right to use my name, photograph, video, or other image for marketing, public relations, and/or educational purposes. I grant Kent County Animal Shelter the right to use the name or image described above in print, video, and/or electronic media. I understand that Kent County Animal Shelter retains all rights to use, publish or distribute the name or image described above without seeking any further permission from me or providing me any royalty. I ask that Kent County Animal Shelter use reasonable efforts to give me advance notice of any such use, but such notification is not a condition to Kent County Animal Shelter use or publication of my name or image.
- ☐ I grant permission for Kent County Animal Shelter to conduct a criminal background check.

**Signature**\_\_\_\_\_ **Date**\_\_\_\_\_